



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

FEB 14 2014

REPLY TO THE ATTENTION OF:
WC-15J

CERTIFIED MAIL 7009 1680 0000 7675 1667
RETURN RECEIPT REQUESTED

Dwayne M. Polarek
Sewer Department Supervisor
Sewer and Water Department
City of Lake Station
1969 Central Avenue
Lake Station, IN 46405

Subject: Wet Weather/Sanitary Sewer System Information Request
Issued pursuant to Section 308(a) of the Clean Water Act, 33 U.S.C. § 1318(a)
Docket No. V-W-14-308-14

Dear Mr. Polarek:

Protecting water quality is a high priority of the U.S. Environmental Protection Agency. Pollutants such as bacteria discharged to waterways from sewer overflows contribute to poor water quality and impairment of uses of those waterways. As authorized by the Clean Water Act (CWA), the National Pollutant Discharge Elimination System (NPDES) permit program controls water pollution by regulating point sources that discharge pollutants into waters of the United States.

The Indiana Department of Environmental Management (IDEM) issued permit number IN0022977 to the Gary Sanitary District. The permit authorizes discharges to waters of the United States in accordance with effluent limitations, monitoring requirements and other conditions set forth in the permit. The enclosed Information Request seeks information related to the operation and maintenance of the portion of Lake Station's sewer collection system that collects and conveys sewage ultimately destined for the Gary Sanitary District Wastewater Treatment Plant including information about sewer overflows that may have left the collection system prior to receiving required treatment.

EPA is authorized under Section 308(a) of the CWA, 33 U.S.C. § 1318(a), to require reports and other information necessary to carry out the purpose of the CWA. Accordingly, pursuant to Section 308(a) of the CWA, you are directed to provide EPA with the information requested in the enclosure.

In accordance with Section V, Paragraph 2 of the Information Request, you must include with your response a statement certifying that all information you submit is true and accurate to the best of your knowledge and belief using the certification language provided in that paragraph. Any questions that do not directly relate to your municipality's sanitary sewer system operations can be addressed with "not applicable" and a brief explanation.

Please exercise care to assure that responses are complete and accurate because Section 309(c)(2) of the CWA, 33 U.S.C. § 1319(c)(2), imposes criminal penalties where false information is knowingly provided to EPA.

You must submit a written response, with the information requested in the enclosure, within 30 days of receipt of this request to:

Water Enforcement and Compliance Assurance Branch (WC-15J)
U.S. Environmental Protection Agency, Region 5
77 West Jackson Boulevard
Chicago, Illinois 60604
Attention: Jennifer Welch, Environmental Engineer

Thank you for your cooperation in this matter. If you have any questions about this request for information, please contact Jennifer Welch of my staff, at (312) 353-4628, or via email at welch.jennifer@epa.gov.

Sincerely,



Tinka G. Hyde
Director, Water Division

Enclosure

cc: Mark Stanifer, IDEM, w/enclosure

bcc: James Coleman w/enclosure
308 file w/enclosure
J. Welch w/enclosure (via email)
W. Jones w/enclosure (via email)
M. Koller w/enclosure (via email)

**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5**

IN THE MATTER OF:

City of Lake Station
Lake Station, Indiana

) Docket No. V-W-14-308-14
)
)
)
)
)
) Proceeding under Section 308(a) of
) the Clean Water Act, as amended,
) 33 U.S.C. § 1318(a)
)

INFORMATION REQUEST

I. STATUTORY AUTHORITY

The U.S. Environmental Protection Agency is issuing this Information Request to the City of Lake Station (You) pursuant to the authority vested in the Administrator of EPA by Section 308(a) of the Clean Water Act (CWA), 33 U.S.C. § 1318(a). The Administrator has delegated this authority to the Regional Administrator of EPA, Region 5, who has re-delegated this authority to the Director of the Water Division, EPA Region 5.

II. INSTRUCTIONS

1. You must respond to this Information Request within 30 calendar days of its receipt by You. Submission instructions are in Section V of this Information Request.
2. You must respond separately to each of the requests. Where a "yes" or "no" answer is requested, You may provide additional information, if desired. Precede each answer with the number of the request to which it corresponds. For each document produced in response to this Information Request, indicate on the document, or in some other reasonable manner, the number of the request to which it corresponds.
3. If You do not have documents responsive to a particular request, state in your written response that You do not have responsive documents.
4. You must keep the reports and all records reviewed or generated in the course of responding to this Information Request until EPA informs You in writing that You are no longer required to keep the reports and records, or for three years, whichever is sooner.

III. DEFINITIONS

1. "Backup" or "Building/Property Backup" shall mean any release of wastewater to public or private property that is caused by Blockages or other conditions in the Sanitary Sewer System. Such releases can include, but are not limited to, those that occur in basements.
2. "Blockage" shall mean the partial or complete interruption of flow as a result of some obstruction in any portion of the Sanitary Sewer System.
3. "Bypass," as defined by 40 C.F.R. § 122.41(m), shall mean the intentional diversion of waste streams from any portion of a treatment facility.
4. "Collection System" shall mean all portions of your sewer system that collect and convey sanitary and/or combined sewage ultimately destined for treatment to the Gary Sanitary District WWTP. The Collection System, for purposes of this Information Request, does not refer to a separate storm sewer system.
5. "Combined Sewer System" shall mean all portions of your sewer system designed to convey municipal sewage (domestic, commercial, and industrial wastewater) and stormwater through a single-pipe system to the wastewater treatment plant or to combined sewer outfalls.
6. "Day" or "days" shall mean a calendar day or calendar days. In computing any period of time under this Information Request, where the last day would fall on a Saturday, Sunday, or federal or state holiday, the period shall run until the close of the next business day.
7. "Force Main" shall mean any pipe that carries wastewater under pressure from the discharge side of a pump to a point of gravity flow downstream.
8. "Gravity Sewer" shall mean a pipe that receives, contains, and conveys wastewater that is not normally under pressure and is intended to flow unassisted under the influence of gravity.
9. "Infiltration" shall mean water, other than wastewater, that enters your Sanitary Sewer System (including sewer service connections) from the ground through such means as defective pipes, pipe joints, connections, or manholes.
10. "Inflow" shall mean water, other than wastewater, that enters your Sanitary Sewer System from sources such as, but not limited to, roof leaders, cellar drains, yard drains, area drains, foundation drains, drains from springs and swampy areas, manhole covers, cross connections between storm sewers and sanitary sewers, catch basins, cooling towers, stormwater, surface runoff, street wash waters, or drainage.
11. "I/T" shall mean the total quantity of water from Infiltration and Inflow without distinguishing the source.

12. "Private Lateral" shall mean that portion of the Sanitary Sewer System, not owned by You, used to convey wastewater from a building or buildings to that portion of the Sanitary Sewer System owned by You.
13. "Pump Station" shall mean facilities comprised of pumps or other equipment that lift wastewater to a higher hydraulic elevation, including all related electrical, mechanical, and structural systems necessary to the operation of that pumping station.
14. "Record" or "records" shall mean any recording of information in tangible form. It includes, but is not limited to, documents, memoranda, reports, letters, maps, graphs, charts, log books, notes, emails, computer files, computer printouts, and computer databases.
15. "Sanitary Sewer Overflow" or "SSO" shall mean an overflow, spill, diversion, or release of wastewater from or caused by your Sanitary Sewer System. This term shall include: (i) discharges to waters of the United States from the Sanitary Sewer System; and (ii) any release of wastewater from the Sanitary Sewer System to public or private property that does not reach waters of the United States, including Backups.
16. "Sanitary Sewer System" shall mean all portions of your sewer system (including all pipes, Force Mains, Gravity Sewer segments, overflow structures, regulators, Pump Stations, manholes, and components thereof), designed and constructed to collect and convey only sewage, and not storm water, from residences, commercial buildings, industrial plants, and institutions for treatment at the Gary Sanitary District WWTP.
17. "Satellite Sewer System" shall mean a sewer Collection System that collects wastewaters from a legal entity other than You and delivers these wastewaters to your receiving sewer(s) or interceptor(s). Legal entities can include unincorporated areas. The Satellite Sewer System often, but not always, depends on a downstream authority for the treatment of these transferred wastewaters.
18. "Wastewater Treatment Plant" or "WWTP" shall mean the wastewater treatment plant operated by Gary Sanitary District, National Pollutant Discharge Elimination System (NPDES) Permit Number IN0022977, and located at 3600 West Third Avenue, Gary, Indiana and all components of such sewage treatment plant.
19. "You" for purposes of this Information Request refers to the City of Lake Station and to any agents, employees, contractors, or other entities that performed work or acted in any way on behalf of, or at the direction of, the City of Lake Station.

IV. REQUESTS

General Information

1. Provide the name and address of the location(s) where You maintain records relative to the operation and maintenance (O&M) of your Sanitary Sewer System.
2. Provide the name and title of the primary contact person(s) responsible for Sanitary Sewer System collection and maintenance. Also provide telephone, fax, and email contact information for such person(s).
3. Provide the following documents:
 - a. The latest NPDES permit(s), if applicable, issued to You for the WWTP/Sanitary Sewer System and storm sewer system, including modifications, the associated permit application, and certificate of coverage
 - b. A map of the service area for your Sanitary Sewer System that identifies the following information:
 - i. Delineation of separate and combined sewer areas, if applicable
 - ii. Delineation of different WWTP service areas, if applicable (e.g., areas served by Gary Sanitary District (GSD) WWTP); areas served by another wastewater treatment facility)
 - iii. Delineation of separate storm sewer areas, if applicable
 - iv. Locations of SSOs reported in Question 27, chronic street flooding areas reported in Question 18, and chronic Backup areas reported in Question 39 (can be hand-written/drawn on map)
 - v. Location of all permitted and/or non-permitted outfalls for your Sanitary Sewer System and for your Combined Sewer System(s)
 - c. Geographic Information Systems (GIS) shapefiles representing the following:
 - i. Collection System service area
 - ii. Current municipal boundaries
 - iii. Sanitary Sewer System pipes
 - d. Your most recent sewer use ordinance (SUO)
 - e. Your most recent annual report for your municipal separate storm sewer system (MS4) or the name and address of the MS4 entity operating your storm sewers
 - f. Current contract agreement with GSD that identifies the costs for which You are responsible and the services that GSD provides

- g. Your most recent Comprehensive Annual Financial Report (CAFR) or similar financial statement that includes data on your most recent annual wastewater revenue and costs; identify in the CAFR or other financial statement where You record the costs paid to GSD
- h. Your most recent rate study for wastewater activity and Sanitary Sewer System use
- i. Provide your budget for the wastewater activity for the current year including proposed wastewater system capital improvements.

Service Area and Service Connections

4. Provide the following information for your Sanitary Sewer System:

- a. Service area (in square miles) _____
- b. Population served _____
- c. System inventory _____

Miles of Gravity Sewer	Miles of Force Main	Number of Pump Stations

d. Number of service connections:

Residential _____ Commercial _____
 Industrial _____ Total _____

e. Number of households served by your Collection System: _____

f. Number of commercial service connections that include residential households (i.e., households in multi-family/apartment/condominium buildings treated as a single commercial service connection or account by You): _____

g. Number of multi-household residential service connections: _____

5. Identify the percent of your wastewater flow conveyed to and treated at GSD WWTP that is generated by residential users.

6. Identify the percent of your wastewater conveyed to and treated at GSD WWTP that is generated by industrial users.

7. Is all of the wastewater flow generated by your Collection System users conveyed to and treated at GSD WWTP?

Yes _____ No _____

8. If wastewater is conveyed to and treated at any other WWTP in addition to GSD WWTP, provide the following information:
- Name, location, and NPDES Permit Number of all other WWTPs to which You convey wastewater through your Collection System for treatment
 - Breakdown by percentage of your total wastewater flow conveyed to and treated at GSD WWTP and all other WWTPs
 - Breakdown of the number of households within the community that contribute to the wastewater flow conveyed to and treated at GSD WWTP and all other WWTPs
 - Breakdown by percentage of your total wastewater costs (e.g., annual O&M, depreciation, debt service, etc.) that can be attributed to each of the WWTPs to which You convey wastewater through your Collection System for treatment
9. Provide actual flows experienced for the previous 12 months expressed in million gallons per day (MGD). Cite the source/basis or calculation method from which You obtained these values (e.g., wastewater or drinking water flow meters, billing statements, etc.).

	Average Daily Wastewater Flow (MGD)	Source/Basis (or calculation method) of Average Daily Wastewater Flow Values	Average Daily Water Consumption (MGD)	Source (or calculation method) of Average Daily Water Consumption Values
Residential				
Commercial				
Industrial				
Other				
Total				

10. Do You make any adjustments to billing for wastewater services (e.g., averaging of winter month water use to remove impact of water for outside use in summer months)?
Yes _____ No _____

If yes, describe the adjustments made.

11. Is a portion of the Collection System a Combined Sewer System?
Yes _____ No _____

- If yes, what percent of the Collection System is combined? _____
- On what is this percentage based (e.g, flow, area, size/length of pipe, etc.)?

Collection System Infrastructure and Capacity

12. Provide infrastructure age distribution estimates for the Collection System.

Age	Gravity Sewer, miles	Force Mains, miles or feet	Number of Pump Stations
0 - 25 years			
26 - 50 years			
51 - 75 years			
> 76 years			

13. Provide pipe size distribution estimates for the Collection System.

Diameter in inches	Gravity Sewer, miles	Force Mains, miles or feet
8 inches or less		
9 - 18 inches		
19 - 36 inches		
> 36 inches		

14. Indicate or describe a property owner's responsibility for maintenance and repair of Private Laterals (check one):

- a. At main line connection only _____
 - b. From main line to property line or easement/cleanout _____
 - c. Beyond property line/cleanout _____
 - d. Other _____
- Explain _____

15. Describe any atypical local conditions that may increase the complexity or difficulty of the design, construction, operation, and maintenance of the Collection System.

16. Describe the process or procedures that You use to determine whether the capacity of the existing Sanitary Sewer System are adequate for new connections.

17. Identify whether You do the following to determine if the capacity of the existing Sanitary Sewer System is adequate for new connections.

- a. Is flow metering performed prior to allowing new connections?
Yes ____ No ____
- b. Do You use a hydraulic model of the Sanitary Sewer System to predict the effects of new connections?
Yes ____ No ____
- c. Do You require written certification by a licensed professional engineer indicating that the Sanitary Sewer System has been determined to have adequate capacity to accommodate flow from new connections?

Yes _____ No _____

18. Are there portions of the Collection System service areas that have experienced street flooding, with sewage as a component, in the past five years?

Yes _____ No _____

If yes, describe and list all areas that experience chronic street flooding.

Satellite Sewer Systems/Sewer Use Ordinance

19. Does the Collection System receive flow from Satellite Sewer System communities?

Yes _____ No _____

If yes, complete the following chart. If additional room is needed, continue on last page or attach a separate table.

Satellite Community Name	% Flow Contributed	Primary Contact Name and Contact Information (address, phone, email) for Satellite

20. Do Satellite Sewer System communities enter into written agreements for wastewater services (contracts, charters, court orders, etc.) with You?

Yes _____ No _____

If yes, please answer the following questions listed below:

- a. Do the agreements have a date of termination?

Yes _____ No _____

If yes, under what conditions are such agreements renewed?

- b. Do the agreements extend the requirements of the SUO to the Satellite Sewer System communities?
Yes _____ No _____
- c. Does the SUO clearly include standards, inspections, and approval for new connections?
Yes _____ No _____
- d. Does the SUO require Satellite Sewer System communities to adopt the same standards, inspection and sampling schedules as You for new connections?
Yes _____ No _____
- e. Does the SUO require Satellite Sewer System communities to adopt the same standards, inspection and sampling schedules as You for pretreatment inspections?
Yes _____ No _____
- f. Do You maintain the legal authority to control the maximum flow introduced into the Collection System from Satellite Sewer System communities?
Yes _____ No _____
- g. Is flow metered at locations where flow from the Satellite Sewer System communities directly enters your Collection System?
Yes _____ No _____
- h. Do You charge Satellite Sewer System communities based on metered flow?
Yes _____ No _____

If yes, identify the specific rate structure in place.

If no, describe how You charge Satellite Sewer System communities for connection to your Collection System.

- i. Do You have the authority to surcharge Satellite Sewer System communities for excessive flows (i.e., for excessive I/I)?
Yes _____ No _____
 - j. Have You exercised your authority to surcharge Satellite Sewer System communities for excessive flows (i.e., for excessive I/I)?
Yes _____ No _____
21. If yes, identify the Satellite Sewer System communities for which You took this action, when You took the action, and describe the action You took. If no, explain why You did not exercise the authority to surcharge for excessive flows. Indicate whether the SUO contains procedures for the following:
- a. Inspection standards Yes _____ No _____

- | | | |
|---------------------------------|-----------|----------|
| b. Pretreatment requirements | Yes _____ | No _____ |
| c. Building/sewer permit issues | Yes _____ | No _____ |
| d. Inflow prohibition | Yes _____ | No _____ |

22. Indicate whether the SUO contains procedures and enforcement authority to control the following:

- | | | |
|--|-----------|----------|
| a. Fats, oils, and grease | Yes _____ | No _____ |
| b. I/I | Yes _____ | No _____ |
| c. Building structures over the sewer lines | Yes _____ | No _____ |
| d. Storm water connections to sanitary lines | Yes _____ | No _____ |
| e. Defects in Private Laterals | Yes _____ | No _____ |
| f. Sump pump or air conditioner discharge | Yes _____ | No _____ |

Force Mains

23. Identify the total number of Force Main failures that have occurred in the last five years.

24. Provide a description of the cause(s) of each Force Main failure that has occurred in the last five years.

25. Describe the techniques/approaches You use to monitor the Force Main.

Pump Stations

26. Provide the following information related to Pump Stations in your Collection System:

- | | |
|--|-------|
| a. Total number of Pump Stations in the Collection System | _____ |
| b. Number of Pump Stations with on-site pump capacity redundancy | _____ |
| c. Number of Pump Stations with dry weather capacity limitations | _____ |
| d. Number of Pump Stations with wet weather capacity limitations | _____ |
| e. Number of Pump Station failures resulting in SSOs, or Backups, in the last five years | _____ |
| f. Number of Pump Stations fed with electrical power from at least two independent electrical power grid feeds | _____ |
| g. Number of Pump Stations with permanently installed backup power generators onsite that automatically activate when supplied power is interrupted | _____ |
| h. Number of Pump Stations with backup power capability, but only with portable generators to be brought to the Pump Station site from other locations | _____ |

- i. Number of Pump Stations with "pump around" capability (i.e., where Pump Station wet well can be evacuated and pumped with portable pump to nearby downstream Sanitary Sewer System manhole) _____
- j. Number of Pump Stations where conditions are monitored remotely and that trigger an alarm at a central monitoring location (e.g., at the WWTP or central public works center) _____

Sanitary Sewer Overflows

27. Describe each SSO that has occurred in the Collection System within the last five years. Include the following information for each SSO (create a supplemental table as necessary to list the data below):

- a. Date of the SSO
- b. Location of the SSO
- c. Estimated volume of the SSO (in gallons or million gallons (MG))
- d. Cause of the SSO
- e. How You determined that the SSO occurred
- f. Depth of precipitation (in inches) received (if any) contributing to the SSO
- g. Peak WWTP flow (in MGD) on the day that the SSO occurred
- h. Disposition of the SSO (i.e., did the release reach a waterway, flow to storm sewer, paved areas, etc.)
- i. Actions taken to mitigate the SSO
- j. Whether or not You reported the SSO to the state environmental agency
- k. How soon after the SSO You reported it
- l. Whether any samples of the SSO discharge were collected and analyzed

28. Identify the number of SSOs that originated from each of the following sources in the last five years:

- a. Manholes _____
- b. Pump Stations _____
- c. Main and trunk sewers _____
- d. Lateral and branch sewers _____
- e. Structural Bypasses or relief points _____
- f. Force Mains _____
- g. Other, explain: _____

29. Identify the volume of SSOs expressed in gallons or MG from each of the following sources in the last five years:

- a. Pump Stations _____
- b. Force Mains _____
- c. Manholes _____
- d. Other, explain: _____

30. Identify the number of SSOs caused by the following in the last five years:

- a. Debris buildup _____
- b. Collapsed pipe _____
- c. Root intrusion _____
- d. Capacity limitations _____
- e. Excessive I/I _____
- f. Fats, oil, and grease _____
- g. Vandalism _____
- h. Power interruption and/or lack of backup power source _____
- i. Mechanical or electronic failure _____
- j. Pump failure and/or lack of backup (or duplex) pumps _____
- k. Other, explain: _____

31. For the SSOs to waterways that are identified in response to Question 27, how many were to surface waters that could affect:

- a. Primary contact recreation (swimming, bathing, waterskiing, etc.) _____
- b. Shellfish growing areas _____
- c. Drinking water sources _____

32. What equipment is available to You for responding to SSOs?

33. Describe how You monitor SSO occurrence and frequency.

34. Identify whether You have developed and adopted written procedures or instructions for the following:

- | | | |
|--|-----------|----------|
| a. Identifying SSOs | Yes _____ | No _____ |
| b. Emergency response for SSOs | Yes _____ | No _____ |
| c. Reporting all SSOs to the state regardless of size | Yes _____ | No _____ |
| d. Containment or cleanup to mitigate the effect of SSOs | Yes _____ | No _____ |
| e. Problem evaluation and resolution | Yes _____ | No _____ |

35. Describe your procedure for reporting SSOs to the state environmental agency.

Backups

36. Describe how You document the occurrence of, and response to, Backups.

37. Indicate the month and year when You began to document Backups: _____

38. Provide a description of each Backup that has occurred within the last five years. Include the following information for each Backup (create a supplemental table as necessary to list the data below):

- a. Date of the Backup
- b. Location of the Backup
- c. Cause of the Backup
- d. Weather conditions during the Backup. If excessive rainfall contributed to the Backup, please list the rainfall amount and the duration of the rainfall event(s)
- e. Methods used to remove the Backup water from the property and disposition of Backup water (i.e., was the property owner's accumulated Backup pumped out of the residence to a street storm sewer drain; relieved to a sanitary cleanout or sanitary drain; transported to the plant for treatment; vacuumed and hauled away; etc.)
- f. Actions taken to mitigate the Backup
- g. Time to clear or fix the Backup
- h. Whether or not the Backup was reported to the state environmental agency and how soon after the Backup this was done
- i. List the measures used to mitigate the environmental harm caused by the Backup water removal, if that water was untreated
- j. Responsible party (e.g., private property owner or You)
- k. Whether or not a damage claim was filed and dollar value of the claim

39. Are there portions of the Collection System that have chronic problems with Backups?

Yes _____ No _____

If yes, list and describe each area and the reasons for chronic Backups in that area.

Blockages

40. Describe how You document the occurrence of, and response to, Blockages.

41. Provide the following information related to Blockages that have occurred in your Collection System in each year for the last five years:

- a. Number of Blockages for each year
- b. Average time to clear a Blockage (minutes)
- c. Number of Blockages resulting in SSOs and/or Backups for each year
- d. Total volume of SSOs (gallons or MG) that resulted from Blockages for each year

Infiltration and Inflow

42. Provide the following information for I/I in the Sanitary Sewer System:

- a. Have You done an assessment to determine the extent of I/I?
Yes _____ No _____ If yes, when? _____ (mo/yr)
- b. Has it been demonstrated that it is more cost effective to eliminate rather than treat I/I?
Yes _____ No _____

c. Have You performed a sewer system evaluation study (SSES), as defined in the U.S. EPA Handbook for Sewer System Evaluation and Rehabilitation (December 1975)?
Yes _____ No _____ If yes, when? _____ (mo/yr)

d. Have rehabilitation projects been prioritized for correcting I/I problems?
Yes _____ No _____

If yes, how far has the I/I elimination program progressed?

e. Do You or any of your Satellite Sewer System communities have a private source I/I reduction program?
Yes _____ No _____

If yes, describe the program.

Operation and Maintenance

43. Provide a list of all major improvements to the Sanitary Sewer Collection System in the last five years. Include proposed future capital improvement projects.

44. Have You developed a capacity, management, operation, and maintenance (CMOM) program, as defined in the U.S. EPA Guide for Evaluating Capacity, Management, Operation, and Maintenance (CMOM) Programs at Sanitary Sewer Collection Systems (January 2005)?
Yes _____ No _____ If yes, when? _____ (mo/yr)

45. Describe the operation and maintenance (O&M) procedures You have in place to locate and eliminate problems in Your Collection System that would cause or contribute to SSOs and Backups. These procedures can include, but are not limited to, grease control, root control, sewer cleaning, I/I evaluation, problem area targeting, downspout disconnection program, etc.

46. Indicate whether You have developed and adopted written procedures or instructions for the following:

a. Collection system maintenance	Yes _____ No _____
b. Collection system capacity management	Yes _____ No _____

47. Do You have a long-range wastewater Capital Improvement Project (CIP) Plan for sewer system rehabilitation, replacement, and expansion?
Yes _____ No _____

If yes, over what time horizon (e.g., five years, 10 years, etc.)? _____

48. Describe how You strive to ensure the long-term viability of your Collection System.

49. Does the Sanitary Sewer System experience chronic O&M problems that are attributed to design problems?

Yes _____ No _____

If yes, provide a brief explanation.

50. Does the Sanitary Sewer System experience chronic O&M problems that are the result of construction issues in the system?

Yes _____ No _____

If yes, provide a brief explanation.

51. Do You physically inspect all Sanitary Sewer System manholes on a defined frequency?

Yes _____ No _____

If yes, on what frequency: every _____ months (e.g., every 36 months)

52. List the frequency of cleaning sewers and manhole basins for the following:

a. Largest sewers: every _____ months (e.g., every 36 months)

b. Smaller sewers: every _____ months

53. Do You conduct internal smoke testing to evaluate the condition of the Collection System?

Yes _____ No _____

If yes, on what frequency? Every _____ months (e.g., every 36 months)

54. When did You last perform smoke testing of the Collection System, in what area, and for what reason?

55. Has the Collection System experienced corrosion problems in the last five years?

Yes _____ No _____

If yes, describe the location where these occurred and if these areas are chronic problem areas.

56. Do You have a corrosion control program in place?

Yes _____ No _____

If yes, what has been the preferred treatment or prevention program selected or implemented?

57. Do You televise the sewers to evaluate the condition of the Collection System?

Yes _____ No _____

58. Do You operate an industrial pretreatment program approved by EPA or the State?

Yes _____ No _____

Customer Complaints

59. Describe how You receive, document, and respond to customer complaints regarding the Sanitary Sewer System.
60. Provide the following information related to Sanitary Sewer System user complaints:
- a. Number of user complaints received each year for the last five years
 - b. Number of user complaints received each year for the last five years that were your responsibility
 - c. Number of claims received and damages paid each year for the last five years
 - d. Number of claims received for damages that were denied each year for the last five years
61. Provide the number of public health or other warnings You issued that were attributed to wastewater each year for the last five years and the dates of each such warning.

Financial Information

62. Provide the following information related to customer billing for use of your Sanitary Sewer System:
- a. Current rate schedule for residential customers
 - b. Average annual bill for the typical residential household for each year for the last five years
 - c. Whether the residential rate is based on water consumption, a flat rate, or a combination of both water consumption and flat rate
 - d. Volume of water assumed to be used per household if residential rate based on a flat rate, whether entirely or partially
 - e. Month and year when the last wastewater and/or Sanitary Sewer System related customer rate increase occurred
 - f. History of rate increases for the past 10 years
 - g. Process by which rate increases are approved (i.e., unilaterally by the public works department/wastewater or water utility/city/village; elected official(s) approval; voter referendum; etc.)
 - h. Process by which customers of Sanitary Sewer System are billed (i.e., which department; by You or by GSD)
63. Provide the following information related to the revenue received from Sanitary Sewer System user charges:
- a. Total annual revenue received for each year for the last five years
 - b. Percent of total annual revenue received used for long-term debt for each year for the last five years

- c. Percent of total annual revenue used for collection and conveyance of wastewater for each year for the last five years
64. Provide the following information related to the revenue received from other sources (e.g., property tax, tap-in fees, etc.) used for O&M of your Sanitary Sewer System:
- a. Total annual revenue received for each year for the last five years
 - b. Percent of total annual revenue used for long-term debt for each year for the last five years
 - c. Percent of total annual revenue used for collection and conveyance of wastewater for each year for the last five years
65. Provide your budget for the wastewater activity for the current year including proposed wastewater system capital improvements.
66. Provide the following fiscal information related to your Collection System for the most recent service year (identify which months You consider your service year):
- a. O&M expenditure for your Collection System
 - b. Annual depreciation for your Collection System
 - c. Annual debt service (principal plus interest) for your Collection System
67. Provide the total annual cost paid to GSD for wastewater related services for service years 2012 and 2013.
68. Identify how You bill customers in your Sanitary Sewer System service area for stormwater collection and management (e.g., separate stormwater utility fee, incorporation into sewer or wastewater bill, etc.).
69. If You utilize a stormwater utility fee or any other user fee that is different from the sewer or wastewater user charge, do You factor in acreage and permeability into the stormwater fee or bill?
- If yes, please describe.
70. Do You recover all or a portion of the costs associated with the O&M of your storm sewer system from the user fees You collect from customers for wastewater related services?
- If yes, what percentage? If less than 100%, indicated from where else You recover your storm sewer system O&M costs.
71. Are there portions of your Sanitary Sewer System service area that are not served by separate storm sewers?
- If yes, please describe.

V. SUBMITTALS

1. Please submit your response to this Information Request within 30 days of your receipt of the Information Request to:

Water Enforcement and Compliance Assurance Branch (WC-15J)
U.S. Environmental Protection Agency, Region 5
77 West Jackson Boulevard
Chicago, Illinois 60604-3590
Attention: Jennifer Welch, Environmental Engineer

2. You must submit all requested information under an authorized signature with the following certification:

I certify under penalty of law that this response and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person(s) who manage the system, or those person(s) directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of a fine and imprisonment for knowing violations.

3. If You find at any time after submitting information to EPA that any portion of the submittal is false or incorrect, You must notify EPA immediately. Knowing submittal of false information to EPA in response to this Information Request may subject You to criminal prosecution under Section 309(c) of the CWA, 33 U.S.C. § 1319(c), and 18 U.S.C. §§ 1001 and 1341.
4. You may not withhold information because You claim it is confidential. However, pursuant to 40 C.F.R. Part 2, Subpart B, You may assert a claim of business confidentiality regarding any portion of the information submitted in response to this Information Request, as provided in 40 C.F.R. § 2.302(a)(2). The regulations provide that a person may assert a business confidentiality claim covering part or all of the information furnished to EPA when that person submits the information. The manner of asserting such claims is specified in 40 C.F.R. § 2.203(b). Effluent data (as defined in 40 C.F.R. § 2.302(A)(2)) and information in NPDES permit applications is not entitled to confidential treatment. 40 C.F.R. § 122.7. Information subject to a business confidentiality claim is available to the public only to the extent, and by means of the procedures, set forth in 40 C.F.R. Part 2, Subpart B. If You do not assert a claim of business confidentiality when You submit the information, EPA may make the information available to the public without further notice.
5. This Information Request is not subject to the Paperwork Reduction Act, 44 U.S.C. § 3501 *et seq.*, because it seeks collection of information from specific individuals or entities as part of an administrative action or investigation.

6. EPA may use the information submitted in response to this Information Request in an administrative, civil or criminal action.
7. Neither the issuance of this Information Request by EPA nor your compliance with this Information Request relieves You of liability for any penalty, fine, remedy or sanction authorized to be imposed pursuant to Section 309(b), (c), (d), or (g) of the CWA, 33 U.S.C. § 1319(b), (c), (d), or (g), including but not limited to those related to any violations addressed by this Information Request. EPA specifically reserves the right to seek any of the remedies specified in Section 309(b), (c), (d), or (g) of the CWA, 33 U.S.C. § 1319(b), (c), (d), or (g).
8. There can be significant civil or criminal penalties for failing to adequately respond to requests for information issued under the Section 308(a) of the CWA, 33 U.S.C. § 1318(a).
9. Please contact Jennifer Welch of my staff by telephone at (312) 353-4628, or via email at welch.jennifer@epa.gov, if You have any questions about this Information Request.


Tinka G. Hyde
Director, Water Division
U.S. Environmental Protection Agency, Region 5

2/17/14
Date

